PAGE 1 / 48

Image# 201605099015395055

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X   F	For Other Than An Au	thorized Committee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	type 12FE4M5	
COMMUNITY ONCOL	OGY ALLIANCE PA	AC .		1
ADDRESS (number and street)	1101 Pennsylvania Avenue	e SW		
Check if different				
than previously reported. (ACC)	Washington		DC	20004
2. FEC IDENTIFICATION NU	JMBER ▼ CI	TY▲	STATE ▲	ZIP CODE 🛦
C C00383976		IS THIS NE REPORT (N)	\$ 2	NDED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	Report Due On: Ma	ur 20 (M3) Jur	Aug 20 (M5) Aug 20 aug 20 (M6) Sep 20 aug 20 (M7) Oct 20	(M9) Dec 20 (M12) (Non-Election Year Only)  (M9) Pec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q  July 15 Quarterly Report (Q  October 15 Quarterly Report (Q	PRE-Election Report for the:	Primary (12P)  Convention (12	General (12	
January 31 Year-End Report (Y  July 31 Mid-Year		ion on		State of
Report (Non-election Year Only) (MY)	n (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R	Special (30S)
Termination Report (TER)	Electi	ion on	D = D / Y = Y = Y = Y	in the State of
5. Covering Period 04	01 2015	through	06 30	2015
I certify that I have examined th	is Report and to the best o	f my knowledge and be	ief it is true, correct and co	omplete.
Type or Print Name of Treasure	Michael Diaz			
Signature of Treasurer Michael	ael Diaz	[Electronically F	ciled) Date 05	09 / 2016
NOTE: Submission of false, errone	eous, or incomplete information	on may subject the persor	n signing this Report to the	penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### COMMUNITY ONCOLOGY ALLIANCE PAC

Report Covering the Period: From: 04 01 2015 To: 06 30 2015

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		38283.76
	(b) Cash on Hand at Beginning of Reporting Period	34652.67	
	(c) Total Receipts (from Line 19)	136552.28	170252.28
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	171204.95	208536.04
7.	Total Disbursements (from Line 31)	26074.76	63405.85
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	145130.19	145130.19
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

## COMMUNITY ONCOLOGY ALLIANCE PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	136483.32	169683.32
(ii) Unitemized	0.00	500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	136483.32	170183.32
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	126492 22	170183.32
Totals to Line 33, page 5)	136483.32	170103.32
. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
. All Loans Neceiveu		7 7
Loop Denovemento Descived	0.00	0.00
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	68.96	68.96
Refunds of Contributions Made	7	7
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts	7	0.00
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds	7	5.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
,	7	7
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Loviii i unus (nom somedule 115)	7	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	136552.28	170252.28
. Total Federal Receipts	100550.00	
(subtract Line 18(c) from Line 19)▶	136552.28	170252.28

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ul> <li>Operating Expenditures: —         <ul> <li>(a) Allocated Federal/Non-Federal</li> </ul> </li> </ul>		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	0574.70	40005.05
Expenditures(c) Total Operating Expenditures	6574.76	12905.85
(add 21(a)(i), (a)(ii), and (b))▶	6574.76	12905.85
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	19500.00	50500.00
Independent Expenditures		
(use Schedule E)	0.00	0.00
. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
	200	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
That I dilical committees		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
. Other Disbursements	0.00	0.00
. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(i) i caciai chaie		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	26074.76	63405.85
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	26074.76	63405.85

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	136483.32	170183.32
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	136483.32	170183.32
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	6574.76	12905.85
7. Offsets to Operating Expenditures (from Line 15, page 3)	68.96	68.96
8. Net Operating Expenditures (subtract Line 37 from Line 36)	6505.80	12836.89

#### : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F3XA

Transaction ID:

Beginning cash balance was off at start of year due to prior year balances being off. Form 99 was filed explaining this difference. Also, amended 1st qtr return which resulted in cash balance at end of first quarter being off from the 2nd qtr beginning of period balance which was corrected here.

Form/Schedule: Transaction ID:

ı	FOR LINE NUMBER:					PAGE	-	1	OF		40
l	(check only one)										
	X	11a		11b		11c		12	2		
l		13		14		15		16	3		17

	J J J						
$\rangle$	NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALL	IANCE PAC					
١.	Full Name (Last, First, Middle Initial) Andrew J Lipman Mailing Address 2060 Laguna Way	Date of Receipt					
	City	State Zip Code	04 11 2015 Transaction ID : 9934565				
	Naples	FL 34109-7109	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	1000.00				
	Name of Employer	Occupation	Memo Item				
	Self	Physician					
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	contribution				
3.	Full Name (Last, First, Middle Initial) Miriam Atkins		Date of Receipt				
	Mailing Address 3696 Wheeler Road		04 11 2015				
	City Augusta	State Zip Code GA 30909-6520	Transaction ID : 9934566				
	Augusta FEC ID number of contributing		Amount of Each Receipt this Period				
	federal political committee.	C	200.00				
	Name of Employer SELF	Occupation	Memo Item				
	Receipt For:	Physician  Aggregate Year-to-Date ▼					
	Primary General		contribution				
	Other (specify) ▼	600.00					
).	Full Name (Last, First, Middle Initial) Michael McCleod		Date of Receipt				
	Mailing Address 10070 Magnolia Pointe		04 11 2015				
	City Fort Myers	State Zip Code FL 33919-4218	Transaction ID: 9934567				
	FEC ID number of contributing	35516 1216	Amount of Each Receipt this Period				
	federal political committee.	C	5000.00				
	Name of Employer	Occupation	Memo Item				
	FCS Receipt For:	MD					
	Primary General	Aggregate Year-to-Date ▼	contribution				
	Other (specify) ▼	5000.00					
s	UBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	6200.00				
T	OTAL This Period (last page this line number of	only)					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:			PAGE		8	OF	48		
(check only one)									
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

or for commercial purposes, other than using the	te name and address of any political committee to	5 SOUCH COMMIDULIONS ITOM SUCH COMMINUTE.
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY AI	LIANCE PAC	
Full Name (Last, First, Middle Initial)  Maen Hussein  Mailing Address 33125 Irongate Drive		Date of Receipt  04 11 2015
City	State Zip Code	Transaction ID: 9934568
Leesburg	FL 34788-3132	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	2000.00 Memo Item
Self	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution
Full Name (Last, First, Middle Initial)  Michael Raymond  Mailing Address 14009 Image Lake Court		Date of Receipt
C:h.	Ctata Zin Cada	04 11 2015
City	State Zip Code FL 33907-1824	Transaction ID : 9934569
Fort Myers	1 L 33907-1824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer FCS	Occupation	Memo Item
Receipt For:  Primary General  Other (specify) ▼	MD Aggregate Year-to-Date ▼  5000.00	contribution
Full Name (Last, First, Middle Initial)  C. Shalin R Shah		Date of Receipt
Mailing Address 16613 Millan DeAvila		04 11 2015
City	State Zip Code	Transaction ID : 9934570
Tampa	FL 33613-1068	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer	Occupation	Memo Item
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	contribution
SUBTOTAL of Receipts This Page (optional)	•	12000.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

						PAGE	9	OF		48
(check only one)										
	×	11a		11b		11c	12	2		
		13		14		15	16	6		17

or for commercial purposes, other than using the	e name and address of any political committee to	5 SOIIGH COMMIDULIONS HOM SUCH COMMINUTE.
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY AL	LIANCE PAC	
Full Name (Last, First, Middle Initial)  Theodore A. Okon,  Mailing Address 30 Wintergreen Drive		Date of Receipt
City Monroe	State Zip Code CT 06468-1061	04 11 2015  Transaction ID: 9934571  Amount of Each Resolut this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	Amount of Each Receipt this Period  1000.00  Memo Item
Self Receipt For:  Primary General  Other (specify) ▼	Oncologist  Aggregate Year-to-Date ▼  1000.00	contribution
Full Name (Last, First, Middle Initial)  Jose Alemar  Mailing Address 935 Pine Hill Road		Date of Receipt  05 08 2015
City Palm Harbor	State Zip Code FL 34683-3014	Transaction ID : 9934572  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer self	Occupation Physician	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution
Full Name (Last, First, Middle Initial)  . Miriam Atkins		Date of Receipt
Mailing Address 3696 Wheeler Road		05 08 2015
City Augusta	State Zip Code GA 30909-6520	Transaction ID: 9934573  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer SELF	Occupation Physician	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  800.00	contribution
SUBTOTAL of Receipts This Page (optional)	•	3200.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 10 OF 48 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

	3	7   1   1   1   1   1   1   1   1   1	
	NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALL	IANCE PAC	
Α.	Full Name (Last, First, Middle Initial) Ralph Boccia Mailing Address 6410 Rockledge Drive	Date of Receipt  05  08  2015	
	City Bethesda  FEC ID number of contributing federal political committee.  Name of Employer self Receipt For: Primary General Other (specify)	State Zip Code MD 20817-1809  C  Occupation physician  Aggregate Year-to-Date ▼  416.66	Amount of Each Receipt this Period  416.66  Memo Item  contribution
3.	Full Name (Last, First, Middle Initial) Richard H Buck Mailing Address 1607 South Drive  City Sarasota  FEC ID number of contributing federal political committee.	State Zip Code FL 34239-5038	Date of Receipt  05 08 2015  Transaction ID: 9934575  Amount of Each Receipt this Period  5000.00
	Name of Employer Self  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  5000.00	Memo Item contribution
<b>D</b> .	Full Name (Last, First, Middle Initial)  Bruce Burns  Mailing Address 1062 Forsyth Street  City  Macon  FEC ID number of contributing federal political committee.  Name of Employer self  Receipt For:  Primary  General  Other (specify)	State Zip Code GA 31201-8637  C  Occupation physician  Aggregate Year-to-Date ▼  416.66	Date of Receipt  05 08 2015  Transaction ID: 9934576  Amount of Each Receipt this Period  416.66  Memo Item  contribution
S	SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	5833.32
т	OTAL This Period (last page this line number o	nly)	

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

48

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALLIANCE PAC Full Name (Last, First, Middle Initial) Dr. Tarek Chidiac Date of Receipt Mailing Address 6816 Royal Plume Drive 08 2015 City Zip Code State Transaction ID: 9934577 OH Dublin 43016-7254 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Julia Cogburn Date of Receipt Mailing Address 2903 W Coachman Avenue 05 80 2015 City State Zip Code Transaction ID: 9934578 FL Tampa 33611-2809 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General contribution Other (specify) 1000.00 Full Name (Last, First, Middle Initial) c. Marsha DeVita Date of Receipt Mailing Address 7263 Lakeshore Drive 05 80 2015 City Zip Code State Transaction ID: 9934579 NY Cicero 13039-9732 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation self Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 500.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9

9

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) for each category of the Detailed Summary Page

(0	che	ck only	or	ie)				
	X	11a		11b		11c	12	
		13		14		15	16	17

or for commercial purposes, other than using	the fiame and address of any political committee t	o donoit donainationo nom duon dominitade.	
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY A	ALLIANCE PAC		
Full Name (Last, First, Middle Initial)  Dr. David A. Eagle  Mailing Address 19017 Peninsula Point Dr	Dr. David A. Eagle		
City Cornelius	State Zip Code NC 28031-7601	05 08 2015  Transaction ID : 9934580	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  1000.00	
Name of Employer  Lake Norman Hem/Onc Specialist	Occupation Oncologist	Memo Item	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	contribution	
Full Name (Last, First, Middle Initial)  3. Dr Justin Peter Favaro  Mailing Address 3029 Carmel Road	•	Date of Receipt	
City Charlotte	State Zip Code NC 28226-6649	05 08 2015  Transaction ID : 9934581  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	2000.00	
Name of Employer Onc Specialists of Charlotte	Occupation Oncologist	Memo Item	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution	
Full Name (Last, First, Middle Initial)  C. Gustavo Fonseca	•	Date of Receipt	
Mailing Address 920 Tuner Camp Road		05 08 2015	
City Inverness	State Zip Code FL 34453-1261	Transaction ID : 9934582  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	5000.00	
Name of Employer self	Occupation physician	Memo Item	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	contribution	
SUBTOTAL of Receipts This Page (optional	)	8000.00	
TOTAL This Period (last page this line numl	per only)		

FOR LINE NUMBER: PAGE 13 OF 48 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

COMMUNITY ONCOLOGY ALLIANCE PAC

Full Name (Last First Middle Initial)

/		
Full Name (Last, First, Middle Initial)  1. Lucio Gordan		Date of Receipt
Mailing Address 188 SW 131st St		05 08 2015
City	State Zip Code	Transaction ID: 9934583
Newberry	FL 32669-3052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	4000.00
Name of Employer	Occupation	Memo Item
Self	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  4000.00	contribution
Full Name (Last, First, Middle Initial)  Ralph Gousse		Date of Receipt
Mailing Address 3145 Cecilia Drive	7. 0 1	05 08 2015
City	State Zip Code	Transaction ID: 9934584
Apopka	FL 32703-7815	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	5000.00
Name of Employer	Occupation	Memo Item
Self	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  5000.00	contribution
Full Name (Last, First, Middle Initial)  Robert Green		Date of Receipt
Mailing Address 2426 Embassy Drive		05 08 2015
City	State Zip Code	Transaction ID: 9934585
West Palm Beach	FL 33401-1013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	Memo Item
self	physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	contribution
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	9500.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) X 11a 11b 11c

14 OF

48

for each category of the 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALLIANCE PAC Full Name (Last, First, Middle Initial) Nuruddin Jooma Date of Receipt Mailing Address 1573 Coachmakers Lane 08 2015 City State Zip Code Transaction ID: 9934586 FL Clearwater 33765-1703 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Memo Item Name of Employer Occupation self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kapisthalam Kumar Date of Receipt Mailing Address 1307 Playmoor Drive 05 80 2015 City State Zip Code Transaction ID: 9934587 Palm Harbor FL 34683-1474 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Memo Item Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Magda E Melchert Date of Receipt Mailing Address 4127 Saltwater Boulevard 05 80 2015 City State Zip Code Transaction ID: 9934588 FL Tampa 33615-5638 Amount of Each Receipt this Period FEC ID number of contributing С 2000.00 federal political committee. Memo Item Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 2000.00 Other (specify) 6000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

Name of Employer

Self Receipt For:

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c **Detailed Summary Page** 

Memo Item

48

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALLIANCE PAC Full Name (Last, First, Middle Initial) Flora W Melgen Date of Receipt Mailing Address 1887 Markham Preserve Trail 05 80 2015 City State Zip Code Transaction ID: 9934589 FL Sanford 32771 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee.

> Occupation Physician

Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	Contribution
В.	Full Name (Last, First, Middle Initial) Kelly Mentzer Mailing Address 3311 SE 18th CT		Date of Receipt  M M M / D D / Y D Y D Y D Y D D D D D D D D D
	City	State Zip Code	Transaction ID: 9934590
	Ocala	FL 34471-6767	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		С	5000.00
	Name of Employer	Occupation	Memo Item
	self	physician	
Receipt For:  Primary General  Other (specify) ▼		Aggregate Year-to-Date ▼  5000.00	contribution
<u>с.</u>	Full Name (Last, First, Middle Initial) Daniel J Morris		Date of Receipt

Mailing Address 8473 Bay Colony Dr 80 2015 05 City State Zip Code Transaction ID: 9934591 FL Naples 34108-0710 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation Physician Self Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 1000.00 Other (specify)

	7 7 8							
SUBTOTAL of Receipts This Page (optional)		7	-	Ι	6500.0	0		
TOTAL This Period (last page this line number	only)		7	- 7				

FOR LINE NUMBER: PAGE 16 OF 48 Use separate schedule(s) for each category of the Detailed Summary Page

I OIT LINE NOWDETT.			ITAGE	-		01		.0		
(check only one)										
>	<b>1</b> 1a		11b		11c		12			
	13		14		15		16			17

UI	ioi commerciai purposes, omer man using me	name and address of any political committee to	SOIICIL COMMIDULIONS HOITI SUCH COMMILLEE.
$\rangle$	NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALL	IANCE PAC	
Full Name (Last, First, Middle Initial)  John A Peterson  Mailing Address 2 Paradise Lane			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID : 9934592
	Treasure Island	FL 33706-1129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	Occupation	2000.00 Memo Item
	Name of Employer	ш	
	Self	Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution
3.	Full Name (Last, First, Middle Initial) Brad Prechtl		Date of Receipt
	Mailing Address 6933 Lacantera Circle	State 7in Code	05 08 2015
	City Lakewood Ranch	State Zip Code FL 34202-5115	Transaction ID : 9934593
		0.1101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5000.00
	Name of Employer self	Occupation Administrator	Memo Item
	Receipt For:		
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  5000.00	contribution
— ).	Full Name (Last, First, Middle Initial)  Daron Street		Date of Receipt
	Mailing Address 2224 E/ 26th Place		05 08 2015
	City	State Zip Code	Transaction ID: 9934594
	Tulsa	OK 74114-4219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	Memo Item
	self	physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	contribution
SI	UBTOTAL of Receipts This Page (optional)		8000.00
т	OTAL This Period (last page this line number o	nly)	

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY A	LLIANCE PAC		
Full Name (Last, First, Middle Initial) Scott Tetreault Mailing Address 1815 Tuscan Hill	Scott Tetreault		
City Tallahassee	State Zip Code FL 32312-4287	Transaction ID : 9934595  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	3000.00	
Name of Employer self	Occupation oncologist	Memo Item	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 3000.00	contribution	
Full Name (Last, First, Middle Initial)  Stephen Allen  Mailing Address 11 West Geyer Lane	·	Date of Receipt	
City Frontenac	05 22 2015  Transaction ID : 9934596  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	1000.00 Memo Item		
Name of Employer Self  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician or Administrator  Aggregate Year-to-Date ▼  1000.00	contribution	
Full Name (Last, First, Middle Initial)  Roy Ambinder		Date of Receipt	
Mailing Address 240 Trismen Terrace  City  Winter Park	State Zip Code FL 32789-3948	05 22 2015  Transaction ID : 9934597  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	5000.00	
Name of Employer	self Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	contribution	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	9000.00	
TOTAL This Period (last page this line numb	<u> </u>		

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY A	ALLIANCE PAC	
Full Name (Last, First, Middle Initial)  Vance Browne  Mailing Address 231 Albert Lane		Date of Receipt
City	State Zip Code	05 22 2015 Transaction ID : 9934598
Port Charlotte	FL 33954-3770	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00 Memo Item
Name of Employer self	Occupation physician	Menio item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	contribution
Full Name (Last, First, Middle Initial)  3. Dr. Patrick Elwood	·	Date of Receipt
Mailing Address 5455 Brownsville Road	05 22 2015	
City Newark	State Zip Code OH 43056-9027	Transaction ID: 9934599
	.000.002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer self	Occupation physician	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	contribution
Full Name (Last, First, Middle Initial)  C. Jeffrey Kirshner		Date of Receipt
Mailing Address 6831 Dutch Hill Road		05 22 2015
City	State Zip Code NY 13066-1770	Transaction ID: 9934600
Fayetteville  FEC ID number of contributing federal political committee.	NY 13066-1770	Amount of Each Receipt this Period  250.00
Name of Employer	Occupation	Memo Item
self Receipt For:	physician	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	contribution
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	6250.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF (check only one)

X 11a 11b 11c 12
13 14 15 16

UI I	ioi commerciai purposes, omer man using me	name and address of any political committee to	Solicit contributions from Such confiffittee.
	NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALL	IANCE PAC	
<b>A.</b> [	Full Name (Last, First, Middle Initial)  Dr. Mark H. Knapp  Mailing Address 5469 Kirby Road  Apt. 63  City  Cincinnati  FEC ID number of contributing federal political committee.  Name of Employer  Mid-Ohio Onc/Hem Inc  Receipt For:  Primary  Other (specify)  General  Other (specify)	State Zip Code OH 45223-1170  C  Occupation Oncologist  Aggregate Year-to-Date ▼  1000.00	Date of Receipt    M
3	Full Name (Last, First, Middle Initial)  Jeanna Knoble  Mailing Address 8833 Ventura Way  City  Dublin  FEC ID number of contributing federal political committee.  Name of Employer self  Receipt For:  Primary  General  Other (specify)	State Zip Code OH 43016-6129  C  Occupation physician  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  05 22 2015  Transaction ID: 9934602  Amount of Each Receipt this Period  1000.00  Memo Item
C. [	Full Name (Last, First, Middle Initial)  Dr. Joseph P. Lynch  Mailing Address 11706 S. Erie Ave  City  Tulsa  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  Other (specify)	State Zip Code OK 74137-8430  C  Occupation Oncologist  Aggregate Year-to-Date ▼  2000.00	Date of Receipt    M
SL	JBTOTAL of Receipts This Page (optional)	<u> </u>	4000.00
TC	OTAL This Period (last page this line number o	nly)	

UI	tor commercial purposes, other than using the	name and address of any political committee to	Solicit Contributions from Such Confiffittee.
$\rangle$	NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALL	IANCE PAC	
۹.	Full Name (Last, First, Middle Initial) Dr. Jerry W. Mitchell Mailing Address 2315 Wildcat Run Court	Date of Receipt	
	City	State Zip Code	05 22 2015 Transaction ID: 9934604
	Powell	OH 43065-5112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00 Memo Item
	Name of Employer self	Occupation physician	Memo item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	contribution
3.	Full Name (Last, First, Middle Initial) Dr. Timothy D. Moore		Date of Receipt
	Mailing Address 1790 Roundwyck Lane	Chata Zia Cod-	05 22 7 2015
	City Powell	State Zip Code OH 43065-7546	Transaction ID : 9934605  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Mid-Ohio Onc/Hem, Inc	Occupation Oncologist	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	contribution
<del></del> С.	Full Name (Last, First, Middle Initial) Dr. Mark L. Segal		Date of Receipt
	Mailing Address 7033 Perry Place		05 22 2015
	City Worthington	State Zip Code OH 43085-2882	Transaction ID: 9934606  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1500.00
	Name of Employer	Occupation	Memo Item
	Mid-Ohio Onc/Hem Inc	Oncologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	contribution
s	UBTOTAL of Receipts This Page (optional)		3500.00
T	OTAL This Period (last page this line number of	only)	

### SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 21 OF

EMIZED RECEIPTS	for each category of the Detailed Summary Page	` —	ck only 11a 13	y one) 11b 14	11	с 5	1	12 16		17_
y information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson fo	or the	purpose	of solic	iting	cont	tributi	ons	

Ar or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALLIANCE PAC Full Name (Last, First, Middle Initial) Dr. Poonkothai Sundaram Date of Receipt Mailing Address 7165 Pleasant Colony Circle 2015 22 City Zip Code State Transaction ID: 9934607 OH Blacklick 43004-7117 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation Self Oncologist Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Mark E. Thompson Date of Receipt Mailing Address 7175 Fox Lake Dr 05 22 2015 City State Zip Code Transaction ID: 9934608 Blacklick OH 43004-8559 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation Mid-Ohio Onc/Hem Inc Oncologist Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 2000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Luis Vaccarello Date of Receipt Mailing Address 2257 Old Stone Road M = M 05 22 2015 City Zip Code State Transaction ID: 9934609 OH Blacklick 43004-9558 Amount of Each Receipt this Period FEC ID number of contributing С 1000.00 federal political committee. Memo Item Name of Employer Occupation MD Zangmeister Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9

FOR LINE NUMBER: PAGE 22 OF 48 Use separate schedule(s) for each category of the Detailed Summary Page

' \	/II LIIVL	NONDELL	.   17101	- 22 01	
(check only one)					
[	<b>X</b> 11a	11b	11c	12	
	13	14	15	16	17

UI	tor commercial purposes, other than using the	name and address of any political committee to	SOIICIL COMMIDULIONS HOITI SUCH COMMILLEE.
$\rangle$	NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALL	IANCE PAC	
١.	Full Name (Last, First, Middle Initial) Dr. Jeffery Zangmeister  Mailing Address 391 Saddle Path Lane N		Date of Receipt
	City	State Zip Code	05 22 2015 Transaction ID: 9934610
	Pataskala	OH 43062-8028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.  Name of Employer	Occupation	1000.00  Memo Item
	, ,	'	_
	Mid-Ohio Onc/Hem Inc  Receipt For:  Primary General  Other (specify) ▼	Oncologist  Aggregate Year-to-Date ▼  1000.00	contribution
3.	Full Name (Last, First, Middle Initial) Asutosh Gor Mailing Address 14437 Ballatyne Country Club		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID : 9934611
	Charlotte	NC 28277-1400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer self	Occupation physician	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	contribution
).	Full Name (Last, First, Middle Initial) Sashi Naidu		Date of Receipt
	Mailing Address 13714 Daltry Lane		05 29 2015
	City	State Zip Code	Transaction ID: 9934612
	Charlotte	NC 28277-2374	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	Memo Item
	self	physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	contribution
S	UBTOTAL of Receipts This Page (optional)		3000.00
T	OTAL This Period (last page this line number o	nly)	

48

or for commercial purposes, other than using	the name and address of any political committee t	do donoit dominations nom duch committee.
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY A	LLIANCE PAC	
Full Name (Last, First, Middle Initial)  Kashyup Patel  Mailing Address 14820 Jockeys Ridge Road	1	Date of Receipt  M M / D D / Y = Y = Y = Y  05 29 _ 2015 _
City Charlotte	State Zip Code NC 28277-3718	Transaction ID: 9934613
FEC ID number of contributing federal political committee.	C 262/7-3/16	Amount of Each Receipt this Period  3000.00
Name of Employer self	Occupation physician	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	contribution
Full Name (Last, First, Middle Initial)  Attique Samdani  Mailing Address 411 W Randolph Road	·	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Hopewell	State Zip Code VA 23860-2938	Transaction ID : 9934614  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	2000.00
Name of Employer self	Occupation physician	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution
Full Name (Last, First, Middle Initial)  Pablo Gonzalez		Date of Receipt
Mailing Address 3312 Fox Hurst Drive		06 10 / Y Y Y Y Y Y
City Midlothian	State Zip Code VA 23113-3741	Transaction ID : 9934615  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer self	Occupation physician	- Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	contribution
SUBTOTAL of Receipts This Page (optional)	•	6000.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 24 OF Use separate schedule(s) for each category of the Detailed Summary Page

	I OIT LINE NOWDETT.					17.00	 	0.	
(c	(check only one)								
	X	11a		11b		11c	12		
		13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY AL	LIANCE PAC	
Full Name (Last, First, Middle Initial)  Maurice Schwartz  Mailing Address 12025 Layton Drive		Date of Receipt
City Glen Allen	State Zip Code VA 23059-7032	06 10 2015  Transaction ID: 9934616  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	C	Amount of Each Receipt this Period  2000.00  Memo Item
self  Receipt For:  Primary General  Other (specify) ▼	physician  Aggregate Year-to-Date ▼  2000.00	contribution
Full Name (Last, First, Middle Initial)  Joshua McFarlane  Mailing Address 1410 Gove Avenue	Chata Zin Cada	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Richmond  FEC ID number of contributing federal political committee.	State Zip Code VA 23220-4602	Transaction ID : 9934617  Amount of Each Receipt this Period  2000.00  Memo Item
Name of Employer self  Receipt For:  Primary General  Other (specify) ▼	Occupation physician  Aggregate Year-to-Date ▼  2000.00	contribution
Full Name (Last, First, Middle Initial) Thomas Gallo Mailing Address 7707 Hollins Road City	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Richmond  FEC ID number of contributing federal political committee.  Name of Employer	VA 23229-6641  C Occupation	Transaction ID : 9934618  Amount of Each Receipt this Period  500.00  Memo Item
self Receipt For:  Primary General Other (specify) ▼	administrator  Aggregate Year-to-Date ▼  500.00	contribution
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	4500.00
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 25 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

48

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALLIANCE PAC Full Name (Last, First, Middle Initial) **David Trent** Date of Receipt Mailing Address 10005 Ramsbury Way 2015 06 10 City State Zip Code Transaction ID: 9934619 VA Richmond 23238-5410 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Memo Item Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Maura Hagan Date of Receipt Mailing Address 3351 Spillway Lane 06 10 2015 City State Zip Code Transaction ID: 9934620 Mechanicsville VA 23111-6253 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Memo Item Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. William Voelzke Date of Receipt Mailing Address 8100 Spenceley Place 06 10 2015 City Zip Code State Transaction ID: 9934621 Richmond VA 23229-8426 Amount of Each Receipt this Period FEC ID number of contributing С 2000.00 federal political committee. Memo Item Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General contribution 2000.00 Other (specify) 6000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9

9

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NOME (check only one)

FOR LINE NUMBER:				PAGE	: 2	26	OF	48		
l	(check only one)									
l	X	11a		11b		11c		12		
		13		14		15		16		17

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY A	LLIANCE PAC					
Full Name (Last, First, Middle Initial)  James Khatcheressian  Mailing Address 1848 W Grace Street		Date of Receipt				
	Mailing Address 1848 W Grace Street					
City Richmond	State Zip Code VA 23220-2105	Transaction ID : 9934622				
FEC ID number of contributing		Amount of Each Receipt this Period				
federal political committee.	C	2000.00				
Name of Employer	Occupation	Memo Item				
self Receipt For:	physician					
Primary General  Other (specify)	Aggregate Year-to-Date ▼  2000.00	contribution				
Full Name (Last, First, Middle Initial)  Lawrence Lewkow		Date of Receipt				
Mailing Address 3520 Landsdowne Road	7.0	06 10 / 2015				
City Midlothian	State Zip Code VA 23113-1365	Transaction ID : 9934623  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	1000.00				
Name of Employer self	Occupation physician	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	contribution				
Full Name (Last, First, Middle Initial)  C. Shobha Nalluri		Date of Receipt				
Mailing Address 12413 Liverpool Lane		06 10 / Y Y Y Y Y				
City Chester	State Zip Code VA 23836-2724	Transaction ID : 9934624  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	2000.00				
Name of Employer	Occupation	- Memo Item				
self Receipt For:	physician					
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution				
SUBTOTAL of Receipts This Page (optional).	· · · · · · · · · · · · · · · · · · ·	5000.00				
TOTAL This Period (last page this line numb	er only)					

FOR LINE NUMBER: PAGE 27 OF 48 Use separate schedule(s) for each category of the Detailed Summary Page

TOTT LINE NOWDETT.			ITAGE	- 4	-,	Oi	70		
(ch	eck only	or	ne)						
×	11a		11b		11c		12		
	13		14		15		16		17

or for confinercial purp	poses, other than using the	name and address of any political committee to	Solicit contributions from Such committee.
COMMUNITY	TTEE (In Full) Y ONCOLOGY ALL	IANCE PAC	
Full Name (Last, F Brian Mitchell Mailing Address 13	irst, Middle Initial) 3421 Stonegate Road		Date of Receipt
City Midlothian		State Zip Code VA 23113-3961	06 10 2015 Transaction ID : 9934625
FEC ID number of federal political con	mmittee.	C Occupation	Amount of Each Receipt this Period  500.00  Memo Item
self  Receipt For:  Primary  Other (specification)	General y) ▼	physician  Aggregate Year-to-Date ▼  500.00	contribution
Full Name (Last, F Ghulum Qures Mailing Address 10			Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Richmond		State Zip Code VA 23229-7741	Transaction ID : 9934626  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	1000.00
Name of Employer self		Occupation physician	Memo Item
Receipt For: Primary Other (specification)	General y) ▼	Aggregate Year-to-Date ▼  1000.00	contribution
Full Name (Last, F Brian Mitchell			Date of Receipt
	3421 Stonegate Road		06 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Midlothian		State Zip Code VA 23113-3961	Transaction ID : 9934627  Amount of Each Receipt this Period
FEC ID number of federal political con	•	С	1000.00
Name of Employer self		Occupation physician	Memo Item
Receipt For: Primary Other (specif	General y) ▼	Aggregate Year-to-Date ▼ 1500.00	contribution
SUBTOTAL of Recei	pts This Page (optional)		2500.00
TOTAL This Period (	last page this line number of	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER (check only one)

FOR LINE NUMBER:				PAGE	2	28	OF	48		
l	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY A	ALLIANCE PAC					
Full Name (Last, First, Middle Initial)  Sharon Goble		Date of Receipt				
Mailing Address 718 Coalbrook Drive	Mailing Address 718 Coalbrook Drive					
City Midlothian	State Zip Code VA 23114-5536	06 10 2015 Transaction ID : 9934628				
		Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	2000.00				
Name of Employer	Occupation	Memo Item				
self Receipt For:	physician	-				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution				
Full Name (Last, First, Middle Initial)  Elke Friedman		Date of Receipt				
Mailing Address 11528 Longview Landing F		06 10 / Y Y Y Y Y Y				
City Richmond	State Zip Code VA 23233-1114	Transaction ID : 9934629  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	2000.00				
Name of Employer self	Occupation physician	- Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution				
Full Name (Last, First, Middle Initial)  C. Seaborn McDonald-Wade		Date of Receipt				
Mailing Address 309 Greenway Lane		06 10 / Y Y Y Y Y Y				
City Richmond	State Zip Code VA 23226-1631	Transaction ID: 9934630  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	2000.00				
Name of Employer	Occupation	Memo Item				
self	physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	contribution				
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	6000.00				
TOTAL This Period (last page this line numb	per only)					

or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY A	LLIANCE PAC	
Full Name (Last, First, Middle Initial)  Christopher Kellogg  Mailing Address 8749 E Artisan Pass		Date of Receipt
City Scottsdale	State Zip Code AZ 85266-1644	06 25 2015  Transaction ID : 9934631  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer self	Occupation physician	5000.00  Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  5000.00	contribution
Full Name (Last, First, Middle Initial)  Parvinderjit Khanuja  Mailing Address 8110 N Mohave Road		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Paradise Valley  FEC ID number of contributing federal political committee.	State Zip Code AZ 85253-2275	Transaction ID : 9934632  Amount of Each Receipt this Period  5000.00
Name of Employer self  Receipt For: Primary General	Occupation physician  Aggregate Year-to-Date ▼  5000,00	Memo Item
Full Name (Last, First, Middle Initial)  Mailing Address	3000.00	Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code  C Occupation	Amount of Each Receipt this Period  Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).	····	10000.00
TOTAL This Period (last page this line number	er only)	136483.32

## S П

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 30 OF 48					
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)					
ITENIIZED ITECLIF 13		Detailed Summary Page	11a11b11c12					
			13 14 X 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may he name and add	not be sold or used by any pedress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
COMMUNITY ONCOLOGY A	LLIANCE PA	AC						
Full Name (Last, First, Middle Initial)  A. Theodore A. Okon,			Date of Receipt					
Mailing Address 30 Wintergreen Drive			05 22 _ 2015 _					
City	State	Zip Code	Transaction ID : 10613431					
Monroe	СТ	06468-1061	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		68.96					
Name of Employer	Occupation		Memo Item					
Self	Oncologist							
Receipt For:	Aggregate Ye	ear-to-Date ▼						
Primary General Other (specify) ▼		1068.96	Reimbursement for expenses from Jan 9, 2015					
Other (specify)	7	1000.30						
Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Receipt					
Mailing Address			M = M / D = D / Y = Y = Y					
City	State	Zip Code	Amount of Each Receipt this Period					
FEC ID number of contributing			7 unduit of Each Floodipt une Feriod					
federal political committee.	C							
Name of Employer	Occupation		Memo Item					
			_					
Receipt For:	Aggregate Ye	ear-to-Date ▼						
Primary General	33 3							
Other (specify) ▼		<b></b>						
Full Name (Last, First, Middle Initial) C.			Date of Receipt					
Mailing Address			M = M / D = D / Y = Y = Y					
City	State	Zip Code						
			Amount of Each Receipt this Period					
FEC ID number of contributing	C							
federal political committee.								
Name of Employer	Occupation		Memo Item					
Receipt For:	Aggregate Ye	ear-to-Date ▼						
Primary General	1.99.19							
Other (specify) ▼								
SUBTOTAL of Receipts This Page (optional)			68.96					

TOTAL This Period (last page this line number only).....

68.96

	Use separate schedule(s) for each category of the Detailed Summary Page	OR LINE NUMBER:       PAGE 31 OF 48         heck only one)       22       23       24       25       26         27       28a       28b       28c       29       30b
or for commercial purposes, other than using the na  NAME OF COMMITTEE (In Full)  COMMUNITY ONCOLOGY ALLIA	me and address of any political con	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. Community Oncology Alliance  Mailing Address 1101 Pennsylvania Avenue Suite 700		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington Purpose of Disbursement Meals Candidate Name	Cate	Transaction ID : 10612188  Amount of Each Disbursement this Period egory/ ype  Memo Item Meals
Full Name (Last, First, Middle Initial)  B. Community Oncology Alliance  Mailing Address 1101 Pennsylvania Avenue Suite 700  City Washington Purpose of Disbursement Meals  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)	Cate	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. Community Oncology Alliance  Mailing Address 1101 Pennsylvania Avenue Suite 700  City Washington Purpose of Disbursement Meals  Candidate Name	Cate	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

	Han	oroto pobodula/a	FOR LINE NUMBER: PAGE 32					
TEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 27	one) 22 28a	23 28b	24 28c	25 29	
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)  COMMUNITY ONCOLOGY ALLIA			ai committee to	SUIICIT CON	IIDUIIONS	iroin such	commi	<del>.</del>
Full Name (Last, First, Middle Initial)				5				
A. Community Oncology Alliance					Disburser			
Mailing Address 1101 Pennsylvania Avenue Suite 700				06	17		2015	
City	State DC	Zip Code		Transa	ction ID	: 10612490	)	
Washington Purpose of Disbursement	DC	20004						
Lodging			002	Amount	of Each I	Disbursem	ent this	Period
Candidate Name			Category/				826	38
			Type		7	7	020	.30
Senate President	ement For: Primary Other (spe	General cify) ▼		Mem Lodging	o ltem			
State: District:								
Full Name (Last, First, Middle Initial)  3- Community Oncology Alliance, Inc.	c.				Disburser			
Mailing Address 1101 Pennsylvania Avenue, NW				05	04		2015	- Y
City	State DC	Zip Code		Transa	ction ID	: 1061291	7	
Washington Purpose of Disbursement	DC	20004						
Meals			002	Amount	of Each I	Disbursem	ent this	Period
Candidate Name			Category/ Type		,	,	16	5.78
Senate President	ement For: Primary Other (spe	General cify) ▼		Mem Meals	o Item			
State: District:  Full Name (Last, First, Middle Initial)								
Community Oncology Alliance, Inc	С.			Date of	Disburser		YY	V
Mailing Address 1101 Pennsylvania Avenue, NW				06	15		2015	
City Washington	State DC	Zip Code 20004		Transa	ction ID	: 1061292	D	
Purpose of Disbursement Parking and Tolls			002	Amount	of Foob I	Disbursem	ant thia	Daviad
Candidate Name			Category/ Type	Amount			117	
Office Sought: House Disburse Senate	Primary	General	.,,,,,	Mem Parking a	o Item	-		
President State: District:	Other (spe	City) $\blacktriangledown$						

SCHEDULE B (FEC Form 3X)	lla: -	۱۰ التنابد حفد	FOR LINE NUMBER: PAGE 33 OF 48					
ITEMIZED DISBURSEMENTS		ate schedule(s) ategory of the	(orlook orliy					
		ummary Page	21b	22 28a	23 28b	24 28c	25 29	30
Any information copied from such Reports and Statem	l nents may no	nt he sold or us						
or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)		<u> </u>						
COMMUNITY ONCOLOGY ALLIAN	NCE PAC	C						
Full Name (Last, First, Middle Initial)				<b>D</b>	D: 1			
A. Community Oncology Alliance					Disburser			
Mailing Address 1101 Pennsylvania Avenue Suite 700				06	13		2015	Y
•		Zip Code		Tranca	ction ID	: 10613092		
	DC	20004		1141156	ישו ווטוו	. 10013032		
Purpose of Disbursement VTS Sun Taxi - Fred Upton Event			002	Amount	of Each I	Disburseme	ent this F	Period
Candidate Name			Category/			2.2.35		_
			Type				49.2	26
Office Sought: House Disbursem				Mem	o Item			
	Primary Other (speci-	General		VTS Sun	Taxi - Fr	ed Upton E	vent	
State: District:	Other (speci	ıy <i>)</i> ▼						
Full Name (Last, First, Middle Initial)								
B. Community Oncology Alliance				Date of	Disburser		YYY	Υ
Mailing Address 1101 Pennsylvania Avenue Suite 700				06	13		2015	
Washington	State DC	Zip Code 20004		Transa	ection ID	: 10613093		
Purpose of Disbursement Curb Alexandria - Fred Upton Event			002	Amount	of Fach I	Disburseme	nt thic C	Period
Candidate Name			Category/ Type	Amount	oi Lacii i	Zissui seille	19.7	_
	nent For: Primary Other (speci	General	75-		o Item xandria -	Fred Upton	Event	
State: District:		·						
Full Name (Last, First, Middle Initial)  C. PayPal				Date of	Disburser	ment		
Mailing Address 12312 Port Grace Blvd				04	11		2015	Y
City	State	Zip Code		Trans	etion ID	: 9937455		
	NE	68125		iransa	icuon ID	. ฮฮง/400		
Purpose of Disbursement fee			001	Amount	of Each I	Disburseme	ent this F	Period
Candidate Name			Category/ Type				29.3	30
	nent For: Primary Other (speci	General fv) ▼		Mem fee	o Item	,		
State: District:	or (opoor	·11 ▼						
SUBTOTAL of Disbursements This Page (optional)			<b>&gt;</b>		7		98.3	30

SCHEDULE B (FEC Form 3X)	Han annual colored C.	FOR LINE NUMBER: PAGE 34 OF 48					
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orling					
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30			
Any information copied from such Reports and State or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)	no and address of any point	.oar committee te	o delicit delitilidation	THOM SUCH COMMITTEES.			
COMMUNITY ONCOLOGY ALLIA	NCE DAC						
COMMONITI ONCOLOGI ALLIA	INCLIAC						
Full Name (Last, First, Middle Initial)							
<sup>A.</sup> PayPal			Date of Disburse	ement			
Moiling Address 40040 Part Overs Phyl			M M / D				
Mailing Address 12312 Port Grace Blvd			04 1	1 2015			
City	State Zip Code						
La Vista	NE 68125		Transaction ID	: 9937459			
Purpose of Disbursement							
fee		001	Amount of Each	Disbursement this Period			
Candidate Name		Category/		6.10			
Office Sought: House Disburse	ment For:	Туре		7			
Senate	Primary General		Memo Item				
President	Other (specify)		fee				
State: District:	V 1 == 37 - ♥						
Full Name (Last, First, Middle Initial)							
B. PayPal			Date of Disburse	ement			
			M M / D	D / Y   Y   Y   Y			
Mailing Address 12312 Port Grace Blvd			04	2015			
City	State Zip Code						
La Vista	NE 68125		Transaction ID	9937474			
Purpose of Disbursement							
fee		001	Amount of Each	Disbursement this Period			
Candidate Name		Category/		145.30			
	. =	Туре		143.30			
	ment For:		Memo Item				
Senate President	Primary General Other (specify) ▼		fee				
State: District:	Other (specify)						
Full Name (Last, First, Middle Initial)							
C. PayPal			Date of Disburse	ement			
			M M / D	D / Y Y Y Y			
Mailing Address 12312 Port Grace Blvd			04 0	7 2015			
City	State 7in Onda						
City La Vista	State Zip Code NE 68125		Transaction ID	: 9937475			
Purpose of Disbursement	00.20						
fee		001	Amount of Each	Disbursement this Period			
Candidate Name		Category/		50.00			
		Туре		58.30			
	ment For:		Memo Item				
Senate	Primary General		fee				
State: District:	Other (specify) ▼						
State. District.							
SUBTOTAL of Disbursements This Page (optional)		_		209.70			
CODICIAL OF DISDUISEMENTS THIS Page (optional)		·····	7				
TOTAL This Period (last page this line number only	)						

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page (check of 21)	·
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)  COMMUNITY ONCOLOGY ALLIA	ne and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. PayPal  Mailing Address 12312 Port Grace Blvd		Date of Disbursement  O4  O7  O4  O7  O7  O8  O8  O8  O8  O8  O8  O8  O8
City La Vista Purpose of Disbursement fee  Candidate Name  Office Sought: House Disburser Senate President State: District:	State Zip Code NE 68125  001  Category/ Type  nent For:  Primary General Other (specify)   Other (specify)	Transaction ID: 9937476  Amount of Each Disbursement this Period  145.30  Memo Item fee
La Vista Purpose of Disbursement fee  Candidate Name  Office Sought: House Disburser Senate President State: District:	State Zip Code NE 68125  001  Category/ Type  nent For:  Primary General  Other (specify)   Other	Date of Disbursement  M M OT 2015  Transaction ID: 9937477  Amount of Each Disbursement this Period  145.30  Memo Item fee
Full Name (Last, First, Middle Initial)  C. Wells Fargo  Mailing Address 672 Battelfield Boulevard N  City Chesapeake Purpose of Disbursement fee  Candidate Name  Office Sought: House Senate	State Zip Code VA 23320  001 Category/ Type  nent For: Primary General Other (specify)	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE B (FEC Form 3X)	Use separate sche	edule(s)	FOR LINE NUMBER: PAGE 36 OF					
TEMIZED DISBURSEMENTS	for each category Detailed Summary	(check only 21b 27	one) 22 28a	23 24 28b 28c	25 29	26		
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)  COMMUNITY ONCOLOGY ALLIA		ту рошисат	committee to	SOHOL COHE	DUIIOIIS IIOIII SL	ion commit	icc.	
Full Name (Last, First, Middle Initial)  A. PayPal					isbursement			
Mailing Address 12312 Port Grace Blvd				04	10	2015	Y	
City La Vista	State Zip Cod NE 68125	de		Transac	tion ID : 99374	79		
Purpose of Disbursement fee  Candidate Name		[	001	Amount o	f Each Disburse	ement this	Period	
	ement For:	(	Category/ Type	Memo	ltem	29	.30	
Senate President State: District:	Primary Ge Other (specify) ▼	eneral		fee				
Full Name (Last, First, Middle Initial)  B. Community Oncology Alliance, Incommunity Address 1101 Pennsylvania Avenue, NW	<b>3</b> .			Date of D	isbursement	2015	Y	
City	State Zip Coo	le			tion ID : 99374			
Washington Purpose of Disbursement office expense	DC 20004	Тг		Amount o	f Each Disburse	ement this	Period	
Candidate Name			Category/ Type		, , ,	450	.00	
Office Sought:  House Senate President State:  Disburse	ment For: Primary Ge Other (specify)	eneral		Memo office expe				
Full Name (Last, First, Middle Initial) C. Community Oncology Alliance					isbursement			
Mailing Address 1101 Pennsylvania Avenue Suite 700				05	04	2015	Y	
City Washington Purpose of Disbursement	State Zip Coo DC 20004	de		Transac	tion ID : 99374	81		
Lodging			002 Category/	Amount o	f Each Disburse	ement this		
Candidate Name			Туре		7 7			
	ement For:    Primary	eneral		Memo Lodging	Item			

	used by any persolitical committee to	
Zip Code 20004	Category/	Date of Disbursement    Date of Disbursement
Zip Code 20004	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
or: Genera	Type	Transaction ID: 9937484  Amount of Each Disbursement this Peri
or: Genera	Type	Transaction ID: 9937484  Amount of Each Disbursement this Peri
or: Genera	Type	Transaction ID: 9937484  Amount of Each Disbursement this Period 255.85  Memo Item
or: Genera	Type	Amount of Each Disbursement this Peri 255.85  Memo Item
or: 'y Genera	Type	Amount of Each Disbursement this Peri 255.85  Memo Item
ry Genera	Type	255.85 Memo Item
ry Genera	Type	Memo Item
ry Genera	Type	Memo Item
ry Genera	l	
		Date of Disbursement
		05 08 2015
Zip Code 68125		Transaction ID: 9937485
	001	Amount of Each Disbursement this Peri
	Category/ Type	6.10
·	ı	Memo Item fee
		Date of Disbursement
		05 08 2015
Zip Code 68125		Transaction ID: 9937486
	001	
	Category/	Amount of Each Disbursement this Peri
ry Genera		Memo Item fee
		274.33
r	Zip Code 68125  or: ry Genera	Zip Code 68125  O01  Category/ Type  or:

TEMIZED DISBURSEMENTS	Use separate sched for each category of Detailed Summary F	f the	(check only 21b	22				
	1,	age	27	28a	23 28b	24 28c	25 29	
ny information copied from such Reports and State r for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALLIA	·	political				Tom Guo		
Full Name (Last, First, Middle Initial) PayPal				Date of	Disburse		YY	
Mailing Address 12312 Port Grace Blvd				05	0	8	2015	
City La Vista	State Zip Code NE 68125	)		Trans	action ID	: 9937487		
Purpose of Disbursement fee  Candidate Name		[	001	Amount	of Each	Disbursem	ent this	Period
	ement For:    Primary		Category/ Type	Mer fee	no Item		12	.38
State: District:  Full Name (Last, First, Middle Initial)	Other (specify)							
· PayPal				Date of	Disburse		YYY	Y
Mailing Address 12312 Port Grace Blvd				05	C	08	2015	
City La Vista Purpose of Disbursement	State Zip Code NE 68125	•		Trans	action ID	: 9937488		
fee Candidate Name		4	001 Category/	Amount	of Each	Disbursem		Period
Office Sought: House Disburse Senate President State: District:	ment For: Primary Gen Other (specify) ▼	eral	Type	Men fee	no Item			
Full Name (Last, First, Middle Initial) - PayPal				Date of	Disburse		YY	V
Mailing Address 12312 Port Grace Blvd				05		8	2015	
City La Vista Purpose of Disbursement	State Zip Code NE 68125	•		Trans	action ID	: 9937489		
fee Candidate Name		_[	001 Category/	Amount	of Each	Disbursem	ent this	
Office Sought: House Disburse Senate President State: District:	ement For:    Primary	eral	Туре	Mer fee	no Item			
							186	.98

SCHEDULE B (FEC Form 3X)	Lies concrete cohedule(s)			PAGE 39 OF 4
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 28b	24 25 2 28c 29 3
Any information copied from such Reports and St or for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALL				on con comme
Full Name (Last, First, Middle Initial)  A. PayPal			Date of Disbursem	
Mailing Address 12312 Port Grace Blvd			05 08	2015
City La Vista	State Zip Code NE 68125		Transaction ID :	9937490
Purpose of Disbursement fee  Candidate Name		001	Amount of Each D	isbursement this Period
	rsement For:	Category/ Type	Memo Item	14.80
Senate President	Primary General Other (specify) ▼		fee	
State: District:				
Full Name (Last, First, Middle Initial)  B. PayPal			Date of Disbursem	
Mailing Address 12312 Port Grace Blvd			05 08	2015
City La Vista Purpose of Disbursement	State Zip Code NE 68125		Transaction ID:	9937491
fee  Candidate Name		001	Amount of Each Di	isbursement this Period
		Category/ Type		58.30
Senate President	rsement For: Primary General Other (specify)		Memo Item fee	
State: District:  Full Name (Last, First, Middle Initial)			Date of Disbursem	ont
C. PayPal  Mailing Address 12312 Port Grace Blvd			05 08	
City	State Zip Code		Transaction ID :	9937492
La Vista Purpose of Disbursement fee	NE 68125	001	Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		14.80
Office Sought:  House  Senate  President  State:  Disbut	rsement For: Primary General Other (specify)		Memo Item fee	
SUBTOTAL of Disbursements This Page (option	al)	······································		87.90
TOTAL This Period (last page this line number of	only)			

SCHEDULE B (FEC Form 3X)	Han agreement to the control of the	, FOR LINE	PAGE 40 OF 48	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(Greek only one)		
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30
Any information copied from such Reports and State or for commercial purposes, other than using the nai				
NAME OF COMMITTEE (In Full)	no and address of any point	.oar committee te	- Concil Continuation	moni odon ooniiniidoo.
COMMUNITY ONCOLOGY ALLIA	NCE DAC			
/ COMMONITT ONCOLOGI ALLIA	INOL I AC			
Full Name (Last, First, Middle Initial)				
<b>A</b> . PayPal			Date of Disburse	ement
Mailing Address 10010 B. 10			M M / D	
Mailing Address 12312 Port Grace Blvd			05 0	2015
City	State Zip Code			
La Vista	NE 68125		Transaction ID	: 9937493
Purpose of Disbursement				
fee		001	Amount of Each	Disbursement this Period
Candidate Name		Category/		145.30
Office Sought: House Disburse	ment For:	Туре		7
Senate Disburse	Primary General		Memo Item	
President	Other (specify)		fee	
State: District:	V 1 == 37 - ♥			
Full Name (Last, First, Middle Initial)				
B. PayPal			Date of Disburse	ement
			M M / D	D / Y Y Y Y Y
Mailing Address 12312 Port Grace Blvd			05	2015
City	State Zip Code			
La Vista	NE 68125		Transaction ID	: 9937494
Purpose of Disbursement				
fee		001	Amount of Each	Disbursement this Period
Candidate Name		Category/		145.30
		Type		143.30
	ment For:		Memo Item	
Senate President	Primary General Other (specify) ▼		fee	
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)				
C. PayPal			Date of Disburse	ement
- ay: a:			M M / D	D / Y Y Y Y Y
Mailing Address 12312 Port Grace Blvd			05 0	8 2015
Oih.	01-1-			
City La Vista	State Zip Code NE 68125		Transaction ID	: 9937495
Purpose of Disbursement	00120			
fee		001	Amount of Each	Disbursement this Period
Candidate Name		Category/		
		Type		29.30
	ment For:		Memo Item	
Senate	Primary General		fee	
State: District:	Other (specify) ▼			
State: District:				
CURTOTAL of Dishuranments This Dogs (outline)				319.90
SUBTOTAL of Disbursements This Page (optional).		······		1.000
TOTAL This Period (last nage this line number only	)		1	

	JRSEMENTS	for each	rate schedule(s) category of the Summary Page	FOR LINE (check only 21b 27	NUMBER: PAGE 41 OF 48 one)  22 23 24 25 26 28 28 28 28 29 30
or for commercial purpo	ses, other than using the nar EE (In Full) ONCOLOGY ALLIA	me and addre	ess of any polition	ed by any persical committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. PayPal  Mailing Address 1231					Date of Disbursement  O5 08 2015
City La Vista Purpose of Disbursen fee Candidate Name  Office Sought:	nent	State NE  ment For: Primary Other (spec	Zip Code 68125 General	001 Category/ Type	Transaction ID: 9937496  Amount of Each Disbursement this Period  87.30  Memo Item fee
Full Name (Last, Firs B. Wells Fargo	Battelfield Boulevard N	State VA  ment For: Primary	Zip Code 23320	001 Category/ Type	Date of Disbursement    M
State: Dis  Full Name (Last, Firs  C. PayPal  Mailing Address 1237  City La Vista	2 Port Grace Blvd	Other (spec	Zip Code 68125	001	Date of Disbursement    M

SCHEDULE B (FEC Form 3X)	Han any series 1 1 1 1 1	, FOR LINE	PAGE 42 OF 48	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orling		
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 2 28c 29 3
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)	The and address of any point			moni cacii committee.
COMMUNITY ONCOLOGY ALLIA	NCE DAC			
COMMONITI ONCOLOGI ALLIA	INCL I AC			
Full Name (Last, First, Middle Initial)				
<sup>A.</sup> PayPal			Date of Disbursen	nent
Moiling Address 40040 Part Overa Phyl			M M / D E	
Mailing Address 12312 Port Grace Blvd			05 22	2015
City	State Zip Code			
La Vista	NE 68125		Transaction ID :	9937499
Purpose of Disbursement				
fee		001	Amount of Each D	Disbursement this Period
Candidate Name		Category/		29.30
Office Sought: House Disburse	ment For:	Туре		7
Senate Dispulse	Primary General		Memo Item	
President	Other (specify)		fee	
State: District:	(1 <b>)</b> / ▼			
Full Name (Last, First, Middle Initial)				
B. PayPal			Date of Disbursen	nent
			M M / D E	) / Y = Y = Y
Mailing Address 12312 Port Grace Blvd			05 22	2015
City	State Zip Code			
La Vista	NE 68125		Transaction ID :	9937500
Purpose of Disbursement				
fee		001	Amount of Each D	Disbursement this Period
Candidate Name		Category/		145.30
		Туре		143.30
	ment For:		Memo Item	
Senate President	Primary General Other (specify) ▼		fee	
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)				
C. PayPal			Date of Disbursen	nent
			M M / D D	) / Y Y Y Y
Mailing Address 12312 Port Grace Blvd			05 22	2015
City	State Zip Code			
City La Vista	State Zip Code NE 68125		Transaction ID :	9937501
Purpose of Disbursement	00120			
fee			Amount of Each D	Disbursement this Period
Candidate Name		Category/		
		Type		29.30
	ment For:		Memo Item	
Senate	Primary General		fee	
State: District:	Other (specify) ▼			
State: District:				
CUPTOTAL of Disburgoments This Dogs (antique)				203.90
SUBTOTAL of Disbursements This Page (optional).		······		
TOTAL This Period (last nage this line number only	1		1	

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page    FOR LIN (check or   21   27   27   27   27   27   27   27	·
Any information copied from such Reports and Stater or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  COMMUNITY ONCOLOGY ALLIA	e and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. PayPal  Mailing Address 12312 Port Grace Blvd		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
La Vista Purpose of Disbursement fee  Candidate Name  Office Sought: House Disburser Senate President	State Zip Code NE 68125  001  Category/ Type  nent For:  Primary General  Other (specify)   Type	Transaction ID: 9937502  Amount of Each Disbursement this Period  29.30  Memo Item fee
State: District:  Full Name (Last, First, Middle Initial)  B. PayPal  Mailing Address 12312 Port Grace Blvd  City La Vista Purpose of Disbursement fee	State Zip Code NE 68125	Date of Disbursement  05
Candidate Name  Office Sought: House Disburser Senate President State: District:	Category/ Type	29.30  Memo Item fee
Full Name (Last, First, Middle Initial)  C. PayPal  Mailing Address 12312 Port Grace Blvd		Date of Disbursement  05 22 2015
La Vista Purpose of Disbursement fee Candidate Name  Office Sought: House Disburser	Category/ Type  nent For:  Primary General  Other (specify)   State Zip Code  Category/ Type	Amount of Each Disbursement this Period  29.30  Memo Item fee

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	concrete cohodulo(s)		PAGE 44 OF	= 48
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 29 29	26
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan					
NAME OF COMMITTEE (In Full)  COMMUNITY ONCOLOGY ALLIA		ai committee to	Solicit Contributions III	om such committee	<u>.                                    </u>
Full Name (Last, First, Middle Initial)  A. PayPal			Date of Disburseme	ent	
Mailing Address 12312 Port Grace Blvd			05 / 22	2015	
La Vista	State Zip Code NE 68125		Transaction ID: 9	9937505	
Purpose of Disbursement fee  Candidate Name		001	Amount of Each Di	sbursement this Pe	eriod
Office Sought: House Disburser	ment For:	Category/ Type	Memo Item	29.30	)
Senate President	Primary General Other (specify) ▼		fee		
State: District:  Full Name (Last, First, Middle Initial)					
B. Wells Fargo			Date of Disburseme	ent	
Mailing Address 672 Battelfield Boulevard N			06 10	2015	_
Chesapeake	State Zip Code VA 23320		Transaction ID : 9	9937506	
Purpose of Disbursement fee  Candidate Name		001	Amount of Each Di	sbursement this Pe	eriod
	mant Farr	Category/ Type		61.95	5
Office Sought:  House  Senate  President  Disburser	nent For: Primary General Other (specify) ▼		Memo Item fee		
State: District:  Full Name (Last, First, Middle Initial)					
C.			Date of Disburseme		
Mailing Address					_
,	State Zip Code				
Purpose of Disbursement  Candidate Name			Amount of Each Di	sbursement this Pe	eriod
		Category/ Type		, , , , ,	
Office Sought:  House Senate President State: District:	ment For: Primary General Other (specify) ▼		Memo Item		
State: District:					_
SUBTOTAL of Disbursements This Page (optional)		·····•		91.25	5
TOTAL This Period (last page this line number only)	)		45	6510.76	3

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  COMMUNITY ONCOLOGY ALLIAN			33.00
Full Name (Last, First, Middle Initial)  A. Renee Ellmers For Congress Comr  Mailing Address PO Box 99567	nittee		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	7.0.1		03 13 2013
,	tate Zip Code NC 27624		Transaction ID: 9937466
Purpose of Disbursement Contribution Candidate Name		011	Amount of Each Disbursement this Period
Renee Ellmers		Category/ Type	1000.00
Senate President	ent For: 2016 Primary General Other (specify) ▼		Memo Item Contribution
State: NC District: 02  Full Name (Last, First, Middle Initial)			
Guthrie For Congress			Date of Disbursement
Mailing Address PO Box 9639			05 19 2015
,	tate Zip Code KY 42102		Transaction ID: 9937467
Purpose of Disbursement contribution	Г	011	Amount of Each Disbursement this Period
Candidate Name	L	Category/	
S. Brett Guthrie		Type	1000.00
Senate X	ent For: 2016 Primary General Other (specify) ▼		Memo Item contribution
Full Name (Last, First, Middle Initial) - CMR POLITICAL ACTION COMMI	TTEE		Date of Disbursement
Mailing Address PO BOX 2485			06 10 2015
•	tate Zip Code VA 22152		Transaction ID: 9937468
Springfield Purpose of Disbursement contribution	VA 22152		
Candidate Name	l	O11 Category/ Type	Amount of Each Disbursement this Period 2500.00
	ent For:  Primary General  Other (specify)	Nr. 2	Memo Item contribution
SUBTOTAL of Disbursements This Page (optional)		·····	4500.00
TOTAL This Period (last page this line number only).		·····•	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one)  22   X   23   24   25   26   28a   28b   28c   29   30b
Any information copied from such Reports and Staten		d by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  COMMUNITY ONCOLOGY ALLIA	•	a committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)			
A. Friends Of Patrick Murphy			Date of Disbursement
Mailing Address 4521 Pga Blvd #412			06 17 2015
•	State Zip Code		Transaction ID: 9937469
Palm Beach Gardens Purpose of Disbursement	FL 33418		
contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Patrick Murphy	1.5	Type	2300.00
Senate President	nent For: 2016 Primary General Other (specify)		Memo Item contribution
State: FL District:			
Full Name (Last, First, Middle Initial)  Friends Of Pat Toomey			Date of Disbursement
Mailing Address 228 S. Washington St., Suite 115			06 18 2015
Alexandria	State Zip Code VA 22314		Transaction ID: 9937470
Purpose of Disbursement contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Patrick Toomey		Туре	1000.00
Senate President	nent For: 2016  Primary General  Other (specify)		Memo Item contribution
State: PA District:			
Full Name (Last, First, Middle Initial)  Stabenow For Us Senate			Date of Disbursement
Mailing Address P.O. Box 4945			06 22 2015
,	State Zip Code		Transaction ID : 9937471
East Lansing Purpose of Disbursement	MI 48826		
contribution		011	Amount of Each Disbursement this Period
Candidate Name  Debbie Stabenow		Category/ Type	2500.00
	nent For: 2018 Primary General Other (specify)		Memo Item contribution
State: MI District:			
SUBTOTAL of Disbursements This Page (optional)		·····	6000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each category of the	(check only	one) 22 💢 23 🗍 24 📗 25 🦳 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALLIAI	NCE PAC		
Full Name (Last, First, Middle Initial)			
Mike Crapo For Us Senate  Mailing Address PO Box 1948			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			06 23 2015
City S Boise	State Zip Code ID 83701		Transaction ID: 9937472
Purpose of Disbursement contribution	83701	011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each bisbursement this Feriou
Michael Crapo		Category/ Type	1000.00
Office Sought: House Disbursen	nent For: 2016 Primary General Other (specify) ▼	.,,,,	Memo Item contribution
State: ID District:			
Full Name (Last, First, Middle Initial)  3. STEVE ISRAEL FOR CONGRESS	COMMITTEE		Date of Disbursement
Mailing Address P.O. BOX 1400			06 16 2015
MELVILLE	State Zip Code NY 11747		Transaction ID: 9937473
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Steve Israel		Type	2000.00
Senate	nent For: 2016  Primary General  Other (specify)		Memo Item Contribution
State: NY District: 03			
Full Name (Last, First, Middle Initial)  Pete Sessions For Congress			Date of Disbursement
Mailing Address PO Box 823047			06 17 2015
City	State Zip Code		
Dallas	TX 75382		Transaction ID: 9937509
Purpose of Disbursement contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Pete Sessions		Type	1000.00
	nent For: 2016 Primary General Other (specify)		Memo Item contribution
State: TX District: 05	- · · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)			4000.00
TOTAL This Period (last nage this line number only)			

SCHEDULE B (FEC Form 3X)	Lies concrete schedule(s) TON LINE NOVIDER.		-	PAGE 48 OF 4		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) COMMUNITY ONCOLOGY ALLIAN						
Full Name (Last, First, Middle Initial)  A. Upton For All Of Us			Date of Disburseme	ent		
Mailing Address PO Box 490			06 24	2015		
St. Joseph	State Zip Code MI 49085		Transaction ID : 9	937510		
Purpose of Disbursement contribution		011	Amount of Each Di	sbursement this Period		
Candidate Name  Frederick Upton  Office Sought:  House Disbursem	nent For: 2016	Category/ Type		5000.00		
Senate President	Primary General  Other (specify)		Memo Item contribution			
State: MI District: 06  Full Name (Last, First, Middle Initial)  B.			Date of Disburseme	ent		
Mailing Address			M = M / D = D	/ Y = Y = Y = Y		
City	State Zip Code					
Purpose of Disbursement			Amount of Each Di	sbursement this Period		
Candidate Name	"	Category/ Type				
	nent For:  Primary General  Other (specify)		Memo Item			
State: District:  Full Name (Last, First, Middle Initial)						
C. 			Date of Disburseme	ent / Y Y Y Y Y		
Mailing Address						
City	State Zip Code					
Purpose of Disbursement  Candidate Name		Category/	Amount of Each Di	sbursement this Period		
President	nent For: Primary General Other (specify)	Туре	Memo Item	7		
State: District:						
SUBTOTAL of Disbursements This Page (optional)		·····•		5000.00		
TOTAL This Period (last page this line number only).			4	19500.00		